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25278 7590 08/21/2008

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SONYA DOMINGO	(Depositor's name)
/SONYA DOMINGO/	(Signature)
NOVEMBER 21, 2008	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/734,366	12/12/2003	Gerard R. Lazo	0094.03	2526

TITLE OF INVENTION:

COMPUTER DISPLAY TOOL FOR VISUALIZING RELATIONSHIPS BETWEEN AND AMONG DATA

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510.00	\$0	\$1510.00	11/21/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
KIM, PAUL	2161	707-102000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. **Use of a Customer Number is required.**

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Elizabeth R. Sampson

2 David R. Nicholson

3 John D. Fado

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

1. The United States of America, as represented by the Secretary of Agriculture

Washington D.C.

2. Washington State University Research Foundation

Pullman, WA

Please check the appropriate assignee category or categories (will not be printed on the patent) : ☐ Individual ☒ Corporation or other private group entity ☒ Government

4a. The following fee(s) are enclosed:

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☐ Publication Fee (No small entity discount permitted)

☐ Advance Order - # of Copies _____

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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-2135.

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature /Elizabeth R. Sampson/

Date NOVEMBER 21, 2008

Typed or printed name Elizabeth R. Sampson

Registration No. 52,190

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